

Iowa CASA Advocate In-Service Training

Participant Guide

Iowa Child
Advocacy Board

Monitoring a Case



Learning Outcomes:

- Demonstrate an understanding of the CASA's monitoring role.
- Identify the important issues in a case based on specific court hearings and DHS Case Permanency Plan goals.
- Outline case specific monitoring goals for individualized case specific advocacy efforts
- List key components of protective and promotive factors to monitor which lead to resiliency-based recommendations.

Introduction



The children for whom we advocate need a “voice in court” in order to find a safe, permanent home as quickly as the law allows, whether that means returning to a parent or being adopted.

As an Advocate, one of your roles is to provide that voice, sharing with the court both the child's wishes and your recommendations about what is in the child's best interest. In order to provide your astute recommendations to the court you will need to monitor the issues that led the child welfare system to become involved in the children's and families lives. There are several facets to the framework CASA Advocates use to monitor progress and barriers to successfully achieving permanency. These include understanding the court hearing we are monitoring progress towards, the goals and services



the DHS has outlined for providing reasonable efforts, and by assessing protective factors which

could be built upon for long-term resiliency and better outcomes for children and families.

This training is intended to enhance what was shared in the CASA Pre-Service training and the required first year learning opportunities provided to you thus far, e.g. *Investigating and Gathering Information*, *Trauma Informed Advocacy to Build Resiliency*, and the *Report Writing* trainings.



You use the information you have gathered during your monthly Investigation/Gathering Information efforts, from your assessment of the ACEs score and protective factors, and what you incorporated into an objective and thorough CASA Report to dictate what you monitor in the months between court hearings. In addition, monitoring a case requires following what the court orders as being reasonable efforts at each hearing, the progress and barriers to successful goal completion as outlined in the DHS Case Permanency

Plan, and the Advocate's objectively based list of concerns, strengths, and recommendations.

What dictates what you monitor between court hearings?

1. Information you have effectively gathered during your monthly visits with the child and various other individuals involved in the child's life.
2. The ACEs score and protective factors assessments.
3. The DHS CPP which sets steps the family must take to satisfy the court.
4. Your objective and thoroughly written CASA Report, with strengths, concerns and recommendations.
5. Court orders that determine reasonable efforts, noting progress and barriers to successful goal completion.



The positive outcomes for safety, permanency, and well-being that we strive to see become a reality for the children we serve, can be influenced by your effective advocacy efforts. Those efforts include your monthly

contacts which will assist you in monitoring the case and objectively reporting your update to the judge prior to every hearing in your CASA Report.

Judges rely on the information in CASA Court Reports as they make their decisions.



The CASA court report is one of the most essential aspects of your work as an Advocate. It provides a way to systematically organize pertinent information you have gathered and give the court a clear mental image of the

child's situation. It is the tool to effectively communicate the child's perspective. It will provide information on the progress the parents are making and provides your objective concerns about the child's well-being. The Judge uses this objective information to support the Judge's determination of the ongoing court expectations and to rule in the best interest of the child. Your hard work in the case, putting consistent time into the planning, initial investigation and your ongoing monitoring of issues prior to writing each CASA report, elevates the quality of information shared and can improve the effectiveness of the CASA recommendations representing what you believe is in the child's best interest.

Monitoring the Case Self-Assessment

Our first step in monitoring a case is to reflect upon our advocacy actions thus far in the case and determine if there are other responsibilities left undone. The following checklist (originally shared in our pre-service training Module 6 can be a helpful tool for staying on track.

CASA Advocate Responsibilities Checklist (1 of 2)

Review this list periodically while investigating and monitoring a case to ensure that your advocacy is thorough and focused on the needs of the child.

In Progress	Completed	
<input type="checkbox"/>	<input type="checkbox"/>	Review the petition and case file with CASA Coach or Coordinator. Request copies of any hospital records, police reports, photos, protective services investigations, DHS documents or other documentation.
<input type="checkbox"/>	<input type="checkbox"/>	Meet with the DHS caseworker and carefully review the case, checking if there are additional documents not in the court file that may be applicable to the case. .
<input type="checkbox"/>	<input type="checkbox"/>	Meet with the child at least once per month—no matter how old or young—to observe the child in different settings and to determine how the child feels about what is going on in his/her life, in order to determine the child's best interest.
<input type="checkbox"/>	<input type="checkbox"/>	Meet with the parents. Always make sure the parent's attorney is aware of your intended contact. In some judicial districts, permission to speak to their clients must be obtained prior to making contact.
<input type="checkbox"/>	<input type="checkbox"/>	If there is a non-respondent parent or custodian (e.g., a parent or custodian not involved in the court case), attempt contact with that person. If you locate a non-involved parent, provide their contact information to the county attorney for service purposes.
<input type="checkbox"/>	<input type="checkbox"/>	Meet with the teacher, daycare worker, babysitter, and any person who has had substantial contact with the child on a frequent basis.
<input type="checkbox"/>	<input type="checkbox"/>	Appear at all court hearings.
<input type="checkbox"/>	<input type="checkbox"/>	If there has been no physical examination of the child by a physician, and one is warranted, request one from the DHS case manager.
<input type="checkbox"/>	<input type="checkbox"/>	If there has been no psychological evaluation of the child or the parents, and one is warranted, request one from the DHS case manager.
<input type="checkbox"/>	<input type="checkbox"/>	Attend all meetings (e.g., DHS staffings, Family Team Meetings, meetings about the situation at school or IEP) related to the child.
<input type="checkbox"/>	<input type="checkbox"/>	Talk with psychologists and medical caregivers involved with the child and obtain their written reports, providing a copy of your appointment order for the same
<input type="checkbox"/>	<input type="checkbox"/>	Determine what, if any, special problems or unmet needs the child has (e.g., counseling, a special school program, transportation, after-school care, medical treatment, etc.).
<input type="checkbox"/>	<input type="checkbox"/>	Assist in identifying resources for the child that meet his/her needs, and contact appropriate agencies or persons involved with the child to inquire about services. This might be for special educational needs (e.g., tutoring), social needs (e.g., a mentor, a sports team, or a scouting opportunity), placement needs (e.g., contacting a relative), medical or psychological treatment needs, or resources for any other identified need.
<input type="checkbox"/>	<input type="checkbox"/>	Meet with the attorney for the child to discuss the facts and any concerns you have before court hearings; to discuss your recommendations; and to learn whether or not the child will be present in the courtroom either as a witness or to observe the proceedings.
<input type="checkbox"/>	<input type="checkbox"/>	If necessary, prepare the child for court hearings and for testimony by visiting the courtroom with the child before the hearing; asking the attorney for the child how they may help the child in presenting evidence on behalf of the child, etc.

CASA Advocate Responsibilities Checklist (2 of 2)

Review this list periodically while investigating and monitoring a case to ensure that your representation of the child is thorough and focused on the needs of the child.

In Progress	Completed	
<input type="checkbox"/>	<input type="checkbox"/>	If age appropriate, inform the child about the outcome of all court hearings and keep the child updated about other aspects of the case.
<input type="checkbox"/>	<input type="checkbox"/>	Continually monitor the case, repeating the above activities to ensure orders of the court are being followed by all parties and current needs of the child are being met. Make a determination as to whether the parents are correcting the situation that led to the petition and/or removal, are simply "going through the motions," or ignoring the requirements for reunification.
<input type="checkbox"/>	<input type="checkbox"/>	Contact the attorney for the child if the child needs an early review.
<input type="checkbox"/>	<input type="checkbox"/>	Appear at all subsequent hearings.
<input type="checkbox"/>	<input type="checkbox"/>	Review the case permanency plan to ensure that it complies with ASFA guidelines and is in the best interest of the child.
<input type="checkbox"/>	<input type="checkbox"/>	Keep in touch with CASA Coach or Coordinator for guidance and support.
<input type="checkbox"/>	<input type="checkbox"/>	If parental rights have been terminated, review plans for permanent placement, requesting information and consulting with the IDHS Adoption Unit so that appropriate placement occurs without delay.
<input type="checkbox"/>	<input type="checkbox"/>	If the child is an Indian child, make sure the tribe or Bureau of Indian Affairs has been notified of the case by checking court records and/or visiting with the County Attorney/DHS case manager.
<input type="checkbox"/>	<input type="checkbox"/>	If the child is an Indian child, make sure the child's tribal enrollment rights are protected.
<input type="checkbox"/>	<input type="checkbox"/>	If the child is undocumented, consult your CASA Coach or CASA Coordinator.



Monitoring the Case

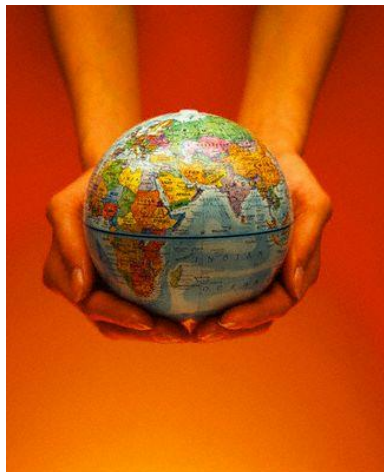
Ongoing Cultural Competency Considerations

CASA effectiveness in presenting information that can be critical to influencing court order recommendations, which ideally improves child and family outcomes, will be dictated by the Advocate's ability to practice objectivity, cultural humility, and open-mindedness to what is in the child's best interest according to the Minimum Sufficient Level of Care standard.

As you are planning your monthly advocacy efforts and determining what critical information you have to share in your CASA report and the additional information you need to gather, it is necessary to routinely consider our level of objectivity.

Advocates need to ask themselves if there are any cultural differences that could increase the potential for misunderstanding or misinterpretation. Perhaps there are other types of differences that exist which might influence the Advocate's presentation of the information. The danger is that it could result in flawed and inaccurate assessments and inappropriate recommendations.

Remembering the Minimum Sufficient Level of Care standard, which is the "basics" of children's needs being met, will help Advocates to identify progress or the need for improvement.





Reflections as a Court Appointed Special Advocate to Prevent Bias:



- What assumptions have I made about the cultural identity, genders, and background of this family?
- What is my understanding of this family's unique culture and circumstances?
- How are my strengths, concerns, and recommendations specific to this child and the child's family?
- How has the DHS and/or court's past contact and involvement with this family influenced (or might influence) the information I gathered, my outline of strengths, concerns, and recommendations and CASA report?
- What evidence has supported every concern I have included, and have I challenged my own unsupported assumptions?
- Have I considered whether the State's reasonable efforts (or active efforts in ICWA cases) have been provided in an individualized way to match the needs of the family?
- Am I considering relatives as preferred placement options as long as they can protect the child and support the permanency plan?
- Have I supported the placement of the child in foster care as a last resort?
- Have I integrated the parents, children, and family members into my information gathering process in a way that ensures they have had the opportunity to be heard, respected, and valued? Have I offered the family and children the chance to respond to my questions from their perspective?
- Have I considered if this family is receiving the same level and tailoring of services as other families might receive?
- Have I considered if the parents' uncooperative or negative behavior is rationally related to the involvement of the agency and/or the court?
- If the youth is of color, LGBTQ or identifies with other minority groups, have I ensured the child's specialized needs are being addressed?

Modified from Gatowski, S., Miller, N., Rubin, S., Escher, P. & Maze, C. (2016) Enhanced resource guidelines: Improving court practice in child abuse and neglect cases. Reno, NV: National Council of Juvenile and Family Court Judges.

Monitoring the Case: Ongoing Case Considerations


Understanding the Juvenile Court Hearing

At each hearing, the court is provided with various reports that the Judge uses to make decisions and outline the court's findings. CASA Advocates should be aware of what the other parties are updating the court about, to be fully aware of current issues, strengths and successes, and current barriers to attainment of the goals.

In addition, the Advocate will monitor any specific findings the Judge outlines on each court hearing's order and will consider what CASA questions or observations need to occur in between each subsequent hearing to monitor progress and barriers.

The following charts outline specific questions to ask and information to gather to provide the full, objective scope of the case status updates at each type of hearing. For example, if you are monitoring a case prior to a Dispositional Hearing, you would want to plan your advocacy effort and time on the type of questions generally considered at the Dispositional Hearing in the months preceding that hearing.

Additional information related to advocating prior to Permanency Hearings can be provided in separate in-service training opportunities.

A  symbol alerts the advocate to the possible presence of cross-cultural issues.

Adjudicatory/Dispositional Hearing




Assessment of Risk

1. What was the harm or act which brought the case before the court?
2. Where is the child placed at this time?
3. If in the home, has the risk of harm been sufficiently reduced to allow the child to remain?
4. If outside the home, has the risk of harm been sufficiently reduced to allow the child to return at this time?
5. If outside the home, is this the least restrictive type of placement that meets the child's needs? The closest to home?
6. How often does the social worker see the child?
7. How often does the social worker see the family?
8. What services are being provided to the family and how do they address the risk of harm?
9. Is the agency making unreasonable demands upon the family?
10. Are additional services needed, and if so, which ones?
11. Are such services available and accessible?

Adjudicatory/Dispositional Hearing







Assessment of Primary Caregiver

1. What progress has been made by the caregiver in eliminating the need for placement?
2. What barriers still exist?
3. What extent has their trauma history played a role in their parenting concerns?
4. What level of motivation and cooperation has been shown by the caregiver?
5. Does the parent believe the services (reasonable efforts) will meet their needs and build on their strengths?
6. Does the parent believe the services are culturally appropriate?

-  7. What level of support has been provided to the caregiver by spouse, significant other, extended family or friends?
- 8. If one of the child's parents has not been involved, what is the history and current status of the relationship between the caregiver and the other parent? Has the caregiver made any effort to contact the other parent? Why or why not?
-  9. What is the visitation schedule? When did it begin? Is it adequate and realistically scheduled? Has the caregiver adhered to it?
-  10. What happens during visits?
- 11. What protective factors or strengths can be highlighted?

Adjudicatory/Dispositional Hearing

Assessment of Child



- 1. Are the child's basic physical needs for food, clothing, shelter, protection and supervision being met?
-  2. How are the child's mental/emotional needs being met?
-  3. What is the child's trauma history? Has the ACE information been gathered?
- 4. Has trauma played a role in the child's behavior? Is trauma being sufficiently considered in decisions about where the child is going to live and with whom?
- 5. Is there a reason to believe the child is a victim of sex trafficking or at risk of becoming a sex trafficking victim?
- 6. What is the child's relationship with his/her siblings?
-  7. How has the child reacted emotionally/behaviorally to out of home care, if applicable?
-  8. What is being done to facilitate a sense of "normalcy" for the child by providing the child with participation in developmentally appropriate activities and events?
- 9. List current school and grade and describe academic functioning.
-  10. Are educational needs being met? If not, why not?
-  11. What is being done about any physical and dental health problems the child has?

- 12. What is being done about any special needs the child has?
- 13. What are the child's wishes regarding placement at this time?
- 14. What are the child's wishes for meaningful family time with parents, siblings, and extended family members?
- 15. What efforts are being made to ensure the child forms and maintains long-lasting connections to caring adults?
- 16. If the child has a period of been missing from placement such as runaway status, why did the child leave? How will the agency address those factors in current/subsequent placements? What experiences did the child have while absent? Was the child exposed to additional traumatic events? How will current/subsequent placements address any needs resulting from that trauma?
- 17. If the child is age 14 or older, has the child selected two members to be part of their case planning team who are not their DHS Caseworker or foster parent?
- 18. Does the case plan outline the child's education, health, visitation, court participation rights, the right to receive a credit report annually, and a signed acknowledgement that the child was provided with their rights with an age appropriate explanation?

Adjudicatory/Dispositional Hearing

Assessment of Out-of-Home Placement

- 1. If the child remains in care, will a different out-of-home placement than the current one be necessary and if so why?
- 2. Have kinship care options been fully explored?
- 3. Have relatives been deemed inappropriate? If so, why?
- 4. If the child is placed in kinship care, what steps have been taken to ensure the relative is linked with all available training, services and financial support?
- 5. If the child needs to be moved, what type of facility would the child be moved to and what is the availability of such placements at this time?
- 6. What will this facility provide for the child? For the parent?


7. Is the placement the least restrictive (most family-like), most appropriate and in close proximity to the parents?
8. If the child has a history of trauma, does the placement have necessary support and training to help the child stabilize and begin the healing process?
9. Is the placement trained to recognize and help children manage traumatic stress reactions?
10. Does the caregiver or placement have the necessary support and training to help the child if the child is a victim of sex trafficking?
-  11. Does the caregiver or placement have the necessary knowledge and skill to treat a child according to the “reasonable and prudent parent standard”?
12. Is the placement in proximity to the child’s educational setting or does it otherwise support educational continuity?
13. Would siblings be placed (or remain) together? If not, has there been documentation the joint placement would be contrary to the safety and well-being of any sibling?
-  14. How is the placement culturally and linguistically appropriate? From the family’s perspective, is the placement culturally and linguistically appropriate?
15. What visitation arrangements would be made between child and parents, i.e. location, frequency, length, transportation, supervision? What arrangements for sibling visitation, if applicable?
16. What is the expected duration of the placement?
17. If this is an ICWA case, is the placement consistent with ICWA placement preferences?

Subsequent Review Hearings

(To be used in conjunction with Adjudicatory/Dispositional Hearing Questionnaire)


1. What is the permanency plan?
2. How long has this child been in care?
3. What percentage of his or her life has been spent in care?
4. How long has the child been with the current caretakers?



5. What is the quality of the relationship between the child and the current caretakers?
6. What is the best estimate of how soon the child can return home?
7. If the plan is not return home, what is it? What level of permanency would this plan provide?
-  8. If the child is unable to return home, what level of involvement would the current caretakers have in his or her future?
9. What progress has been made toward the alternative plan?
10. What are the barriers?
11. What is the length of time anticipated to achieve it?
12. What are the terms of visitation to ensure meaningful family time?
13. How will the case plan address and support the child's well-being?


Reasonable Efforts to Allow the Child to Safely Return Home

(To be used in conjunction with Adjudicatory/Dispositional Hearing Questionnaire)

1. What is preventing the child from *safely* returning home today?
2. What is the current and immediate safety threat? Has the threat diminished? How do you know that? Specifically, how can the risk be ameliorated or removed?
3. What is the safety plan? What specifically prevents the parent from being able to provide the minimally adequate standard of care to protect the child? Will the removal or addition of any person from the home allow the child to be safe and placed back in the home?
4. Have non-custodial parents and other relatives been identified and explored as a concurrent plan?
5. If the safety threat is too high to return the child home, how have the conditions for return be conveyed to the parents, family, and child, and what is your observations that they understand those conditions?
-  6. Are there issues preventing reasonable efforts being successfully utilized by the parent, family, or child for safe reunification?
7. If reasonable efforts have not been provided to the parents or child for reunification to occur, what recommendations need to be made at this time?

Services for Safely Returning Home

(To be used in conjunction with Adjudicatory/Dispositional Hearing Questionnaire)

1. Are the services addressing the specific safety threat?
2. How are the parents, extended family, and children being engaged in the development and implementation of services, interventions and supports?
3. Does the family need additional assistance to access the services?
4. Does the family believe these services, interventions, and supports will meet their current needs and build upon strengths?
5. What additional or alternative services does the family ask to receive?
-  6. How are the services, interventions, and supports specifically tailored to the culture and needs of this child and family?
7. Do services build on family strengths?

Adapted from Gatowski, S., Miller, N., Rubin, S., Escher, P., & Maze, C. (2016) Enhanced resource guidelines: Improving court practice in child abuse and neglect cases. Reno, NV: National Council of Juvenile and Family Court Judges.

Monitoring the Case: Ongoing Case Considerations

Previously Identified Case Concerns, Goals and Expectations

During CASA pre-service training, Advocates learn the basics of exploring the DHS Case Plan life domains in order to understand what the system outlines as the concerns that need to be addressed for families to successfully navigate the child welfare system. In addition, the case plans outline what reasonable efforts (or services) the State of Iowa will provide to the parents, the child, and the family unit, to address those concerns and issues. Those services are generally ordered to be provided and successfully utilized by the family at the Dispositional Hearing in the court order. The Dispositional Review Hearing continues the assessment of those reasonable efforts (services). At times, additional issues and

services are ordered as new information is gathered that sheds light upon the full scope of issues involved in the case.

As the Advocate continues with their monthly contacts it is necessary to monitor the DHS Case Plan goals and timelines. The DHS Case Plan is federally required to be updated, at a minimum, every six months. In some areas of the state this updated plan might visually look different than the original template the DHS Caseworker utilizes at the Dispositional Hearing. It could be referred to as the “refrigerator list” or “progress report” which simplifies the goals and expectations to a manageable and more easily digested list for the parents to refer to during the case. Whichever type of document is routinely used in the Advocate’s court, there are common areas that Advocates need to routinely monitor in the plan. These are also outlined in the previous Juvenile Court Question Charts.

- Does the child need to remain a child in need of assistance so that the case decisions are being ordered by a judge?
- Is the placement of the child appropriate to meet the child’s current needs?
- Is the visitation plan appropriate or has enough progress been demonstrated that the family can have an increased visitation schedule?
- Are the services being provided meeting all of the child, parents, and family needs?
- Are the providers of those ordered services addressing the goals adequately?
- Are there additional services that need to be included to address newly identified issues?
- Are the goals and expectations outlined in a way that it is clear to everyone what the final target looks like for successful goal completion?
- Are the timelines for goal completion clear and manageable?
- What will success look like, so the child can be returned home?

Advocates can use the available resources provided in previous trainings for sample questions to ask related to each specific life domain area. The Advocate uses the information gathered to form their independent

assessment of current functioning. **Handout A** is the Iowa Department of Human Services resource which is provided to DHS Caseworkers to help guide their considerations in these domain areas. Tracking this information for Advocates will occur in two areas within the CAMS system: Contact Notes and within each area of the Assessment profile.

Monitoring Next Steps

Updating Your Advocate Action Plan

After you have considered the types of issues the judge will consider at each court hearing, and reviewed the DHS concerns, goals and expectations, you should begin to outline for yourself those issues that require your advocacy attention in the months ahead on your *Advocate Case Action Plan*. This type of planning for your ongoing contacts with parties will prepare you so you are able to share relevant updated information in your CASA Court report. Your ongoing contacts should cover not only the outlined DHS expectations and goals but also support you in tracking the issues you reported to the Court in your previous CASA reports as being concern or strength areas.

There are numerous areas to gather information to be able to provide a full objective picture to the judge on what has changed or remained the same in between each court hearing. Refer to your *Investigating Toolkit* for a detailed list of questions to ask during your monthly contacts.

As a reminder, your Coach can support you in being an effective Advocate and your Coordinator will update your learning and training needs based on the case issues.



Monitoring Next Steps

Gathering Complete Information for the CASA Report

Assessing and Monitoring Protective and Promotive Factors

Throughout the investigation and monitoring of the case, the Advocate should constantly be identifying strengths and protective factors for individuals and the family. This assessment is formally completed in the Child's Facesheet section that you will update in the CAMS system within the first 60 days of case assignment. Think of this as the CASA's baseline assessment. You will complete this assessment in the CAMS system again, approximately 3 to 6 months later to coincide with your CASA report for that next hearing. Due to the variability at times in hearings being scheduled this may mean its repeated at 5 months to provide enough time prior to your court report being written for inclusion at the review hearing. This repeated assessment can demonstrate progress of an increase in protective and promotive factors. The CASA program can review our advocacy efforts to determine if recommendations influenced this increase.

But ongoing monitoring of protective and promotive factors should also be completed for potential inclusion in your CASA report. This may mean identifying a protective factor that you perceive is a strength for an



individual or the family to call attention to, or it may be the lack of a promotive factor that you see being a barrier to successful goal completion. These are important pieces of data that can be included in your CASA report as a recommendation for the court to consider ordering a service or action to be completed. For example, does the family have friends, relatives, church members, or others who provide the family with needed support? If not, is this a concern that is keeping them from having positive social interactions? Does it rise to the level that a recommendation might be made for the parent to explore ways to increase this protective factor in their life?

There are numerous models of what resiliency is and what it looks like. What are the specific factors that lead to one person or family having the ability, skills, resources or characteristics, that have been refined, practiced and improved upon, which support the individual or family to overcome adversity. Healthy ways of dealing with stress might include fostering one or more of the “Seven Cs”:

- Competence: Ability to handle a situation effectively
- Confidence: Believing in personal abilities
- Connection: Having strong ties to family and community, creating a sense of belonging
- Character: Having a solid set of morals and values to help determine right from wrong
- Contribution: Feeling like a valuable member of society able to make a difference
- Coping: Ability to handle stress appropriately
- Control: Knowledge and ability to effect an outcome

Adapted from “The 7 Cs: The Essential Building Blocks of Resilience,” from Fostering Resilience, <http://www.fosteringresilience.com/7cs.php>

This type of case monitoring may seem hard to pinpoint, as every person demonstrates the ‘seven Cs’ in their own way. The adage “One size fits all” does not apply when we are talking about individualized resiliency. A helpful framework for guiding the specifics regarding protective factors and ways to be more resilient comes from the *Strengthening Families and Youth Thrive* materials of the Center for the Study of Social Policy. Both focus building resilience in five categories of protective factors. Advocates read about the Strengthening Families Protective Factors framework in the *Trauma and Resiliency* training material, so this will be a brief review before we apply it to our CASA Advocate monitoring responsibilities.



Protective Factors and Strengthening Families Categories

Protective factors are the conditions or attributes of individuals, families, communities or the larger society that mitigate risk and promote healthy development and well-being. Put simply, they are the strengths that help to

buffer and support families at risk. We now know that changing the balance between risk and protective factors so that protective factors outweigh risk factors is an effective prevention and intervention strategy. Helping children, youth and families build resilience and develop skills, characteristics, knowledge, and relationships that offset risk exposure can contribute to both short- and long-term positive outcomes.

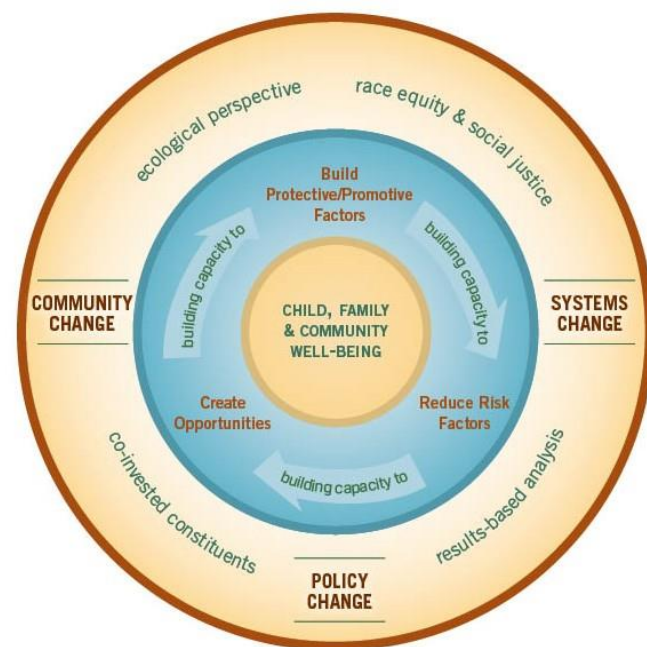
Focusing exclusively on risk factors with families can leave families feeling stigmatized or unfairly judged. On the other hand, using a protective factors approach can be a positive way to engage families because it focuses on families' strengths and what they are doing right. A protective factors approach can also provide a strong platform for building collaborative partnerships by being a "program role model" for other service providers—like child care—that are not as familiar or comfortable with a risk paradigm as a basis for engagement with families.

Over the last decade, the Center for the Study of Social Policy (CSSP) has built *Strengthening Families* into one of the most widely recognized approaches to child abuse and neglect prevention in the country. At its heart, *Strengthening Families* is about how families are supported to build key protective factors that enable children to thrive. The five factors are:

1. parental resilience,
2. social connections,
3. knowledge of parenting and child development,
4. concrete support in times of need, and
5. social-emotional competence of children.

Learn more about each of the five factors on the next two pages.

We have additional in-service training on the Youth Thrive factors to support building individual protective factors for the youth you are assigned.



Protective Factor	Core Meaning
<p>Parental Resilience: Managing stress and functioning well when faced with challenges, adversity and trauma</p>	<p><u>Resilience Related to General Life Stressors</u></p> <ul style="list-style-type: none"> a) managing the stressors of daily life b) calling forth the inner strength to proactively meet personal challenges, manage adversities, and heal the effects of one's own traumas c) having self-confidence d) believing that one can make and achieve goals e) having faith; feeling hopeful f) solving general life problems g) having a positive attitude about life in general h) managing anger, anxiety, sadness, feelings of loneliness and other negative feelings i) seeking help for self when needed <p><u>Resilience Related to Parenting Stressors</u></p> <ul style="list-style-type: none"> a) calling forth the inner strength to proactively meet challenges related to one's child b) not allowing stressors to keep one from providing nurturing attention to one's child c) solving parenting problems d) having a positive attitude about one's parenting role and responsibilities e) seeking help for one's child when needed
<p>Social Connections: Having a sense of connectedness with constructive, supportive people and institutions</p>	<ul style="list-style-type: none"> a) Building trusting relationships; feeling respected and appreciated b) Having friends, family members, neighbors and others who: <ul style="list-style-type: none"> • provide emotional support (e.g., affirming parenting skills) • provide instrumental support/concrete assistance (e.g., providing transportation) • provide informational support/serve as a resource for parenting information • provide spiritual support (e.g., providing hope and encouragement) • provide an opportunity to engage with others in a positive manner • help solve problems • help buffer parents from stressors • reduce feelings of isolation • promote meaningful interactions in a context of mutual trust and respect c) Having a sense of connectedness that enables parents to feel secure, confident and empowered to "give back" to others

Protective Factor	Core Meaning
Knowledge of Parenting and Child Development: Understanding parenting best practices and developmentally appropriate child skills and behaviors	Seeking, acquiring and using accurate and age/stage-related information about: <ul style="list-style-type: none"> a) parental behaviors that lead to early secure attachments b) the importance of <ul style="list-style-type: none"> • being attuned and emotionally available to one's child • being nurturing, responsive and reliable • regular, predictable and consistent routines • interactive language experiences • providing a physically and emotionally safe environment for one's child • providing opportunities for one's child to explore and to learn by doing c) appropriate developmental expectations d) positive discipline techniques e) recognizing and attending to the special needs of a child
Concrete Support in Times of Need: Identifying, accessing and receiving needed adult, child and family services	<ul style="list-style-type: none"> a) being resourceful b) being able to identify, find and receive the basic necessities everyone deserves in order to grow (e.g., healthy food, a safe environment), as well as specialized medical, mental health, social, educational or legal services c) understanding one's rights in accessing eligible services d) gaining knowledge of relevant services e) navigating through service systems f) seeking help when needed g) having financial security to cover basic needs and unexpected costs
Social and Emotional Competence of Children: Forming secure adult and peer relationships; experiencing, regulating and expressing emotions	<p><u>Regarding the parent:</u></p> <ul style="list-style-type: none"> a) having a positive parental mood b) having positive perceptions of and responsiveness to one's child c) responding warmly and consistently to a child's needs d) being satisfied in one's parental role e) fostering a strong and secure parent-child relationship f) creating an environment in which children feel safe to express their emotions g) being emotionally responsive to children and modeling empathy h) talking with one's child to promote vocabulary development and language learning i) setting clear expectations and limits j) separating emotions from actions k) encouraging and reinforcing social skills such as greeting others and taking turns l) creating opportunities for children to solve problems <p><u>Regarding the child:</u></p> <ul style="list-style-type: none"> a) developing and engaging in self-regulating behaviors b) interacting positively with others c) using words and language skills d) communicating emotions effectively

Iowa CASA Program Rationale

Iowa CASA and the child welfare and Juvenile Court systems have recognized the success of serving children by making an impact in their lives and have seen improved outcomes for children in the many areas of services which have been provided to them. But a shift in mindset must occur. We need to also focus on the development of the adults who are important in the kids' lives with active skill building for parents, caseworkers, providers, Advocates and other adults in the community; those that together form the environment of relationships essential to children's lifelong learning, health, and behavior. Greater impacts in the lives of children can be made, and risk diminished, when the adults are served well.

The Center on the Developing Child at Harvard University Science reminds us “science shows us that it is never too late to help adults build up their core capabilities, and that we can have a life-long impact if all adults support the development of these skills in children as well. When adults have opportunities to build the core skills that are needed to be productive participants in the workforce and to provide stable, responsive environments for the children in their care, our economy will be stronger, and the next generation of citizens, workers, and parents will thrive.”



****Activity:** Please watch the 5-minute video, “*Building Adult Capabilities to Improve Child Outcomes*”.

https://youtu.be/urU-a_FsS5Y

Every day we take on the ordinary, sometimes challenging, tasks of work, school, parenting, relationships, and just managing our busy lives. How do we navigate these tasks successfully? And what can send us off course? Science offers an explanation for this issue as well. The following video describes the core capabilities skills, why they are important, how they develop, how they are affected by stress, and how positive conditions support the development of these skills, and how adverse conditions make it harder to build and use them.



****Activity:** Please watch the 5-minute video, *"Building Core Capabilities for Life"*.

<https://youtu.be/6NehuwDA45Q>

As the video mentions, "Core Capabilities", or executive function and self-regulation skills, can be strengthened. The child welfare system and those within it, can "help families by identifying ways to reduce the sources of stress in their lives, by simplifying how services are provided to families, helping the family meet their basic needs and building on strengths. Because small successes lead to bigger ones. With less stress, individuals can practice the skills they already have and build new."

As mentioned earlier, Advocates will update their assessments of each parent's and each child's protective and promotive factors in the CAMS system during the life of the case. Keeping those assessment questions in mind as you monitor the case and complete your ongoing monthly contacts will assist you in gathering updated information for those questions. See **Handout B** for a full list of the CAMS questions for those assessment sections. Each Advocate will complete a Case Note in CAMS for each of their monthly contacts. These notes will include information the Advocate gathered about the protective factors. They may include strengths and/or lack of protective factors and barriers to increasing the protective factors so that it will become a prompt to the type of information the Advocate includes in their court report.

The following tools can be used to help Advocates guide their information gathering about protective and promotive factors and consider "outside-the-box" ways the system can work together to build individual and/or family resiliency. The types of recommendations a CASA Advocate may outline in their report may be instrumental in long-term positive outcomes.

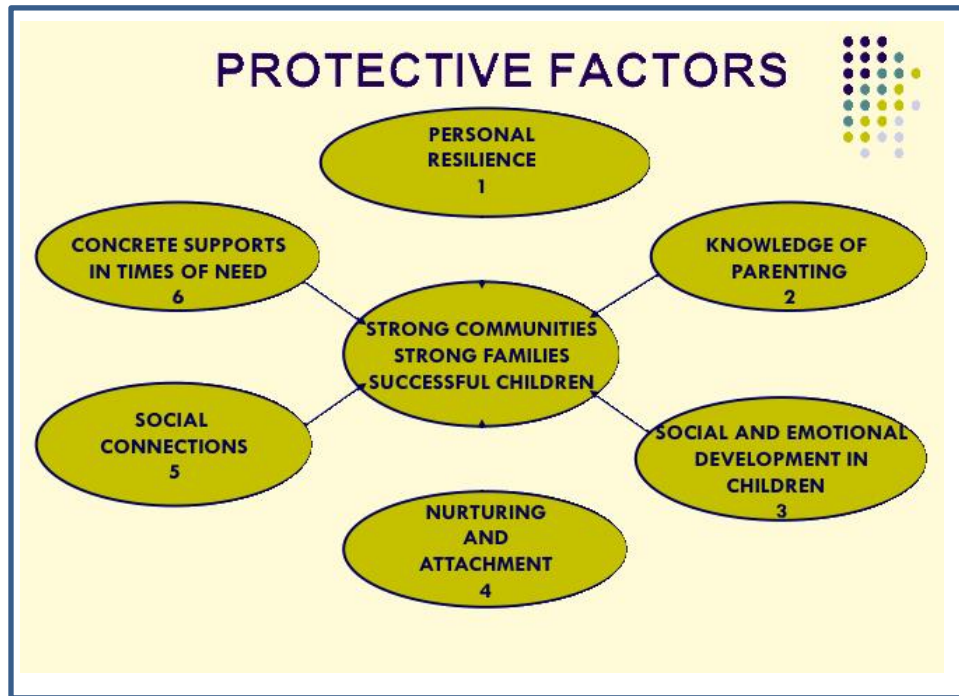
Using Protective Factors to Help Identify Relevant Strengths

Parental Resilience
<ul style="list-style-type: none"> Caregiver exhibits self-awareness around issues that lead to stress, anger, depression or other emotional states that might impair his/her caregiving abilities. Caregiver has self-awareness around aspects of the relationship/interactions with the child that he/she finds challenging. Caregiver has effective self-care strategies already in place for when life feels overwhelming or stressful. Caregiver is able to clearly articulate things he/she enjoys most about each child and about caregiving. Caregiver is willing to engage in structured activities that enhance feelings of connection with the child. Caregiver utilizes proactive self-care strategies to address triggering situations.
Knowledge of Parenting and Child Development
<ul style="list-style-type: none"> Caregiver has a trustworthy source for parenting information that he/she is comfortable turning to when parenting feels overwhelming. Caregiver has interest and curiosity around learning more about parenting and about his/her child as an individual. Caregiver is interested in and willing to try out new parenting strategies.
Social and Emotional Competence of Children
<ul style="list-style-type: none"> Caregiver provides warm and consistent responses to the child. Caregiver engages in activities with the child that support social emotional development. Child exhibits age-appropriate ability to express emotions. Child has a strong bond with the caregiver. Child has a strong bond with another adult. Child has a strong bond with siblings or other children.
Social Connections
<ul style="list-style-type: none"> Caregiver has a friend or family member who he/she trusts as a confidante or ally and who is willing to play a specific role in supporting the caregiver. Caregiver has a trusted friend or family member who can take an active supporting role and is willing to play a specific role in maintaining the child's safety. Caregiver is active in community organizations or social groups that: <ul style="list-style-type: none"> Provide alternatives to behavior(s) that may be contributing to child welfare issues Connect families to community supports that help address the issue(s) that originally brought the family into contact with the child welfare system
Concrete Support in Times of Need
<ul style="list-style-type: none"> Caregiver knows how to access services or supports. Caregiver is connected to friends or other individuals who can support his/her service navigation. Caregiver is comfortable advocating for him/herself and the child. Caregiver is able to articulate concrete needs.

CENTER FOR THE STUDY
OF SOCIAL POLICY'S
strengthening families™
A PROTECTIVE FACTORS FRAMEWORK

****Activity:** **Protective Factors in Practice.** Using **Worksheet 1**, outline what strengths exist in the family to which you are assigned.

Using Protective Factors to Guide Asking Questions



Now that we have a better understanding of protective and promotive factors, how do we assess if a parent has those factors while we are monitoring the case? Part of our investigative role is asking questions that will elicit good information. The following charts provide empowering questions to explore with parents.

These may identify protective and promotive factors which we can highlight in Family Team Meetings and in our CASA Court Report. The information we gather may also identify recommendations which will produce the positive outcomes and support achieving the permanency goal.



Personal/Parental Resilience

The word “resilience” will not be understood by all parents. Explore alternative ways of talking about these skills, for example, using an affirmation such as: “having courage during stressful times or in a crisis.” By communicating with parents, you can help them pinpoint factors that contribute to their stressors, the successful coping strategies they use, and the personal, family, and community resources they’ve found to address their issues. Share those factors and strengths in your CASA Court Report.

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> • What the parent identifies as his or her coping strengths and resilience • The parent’s strengths in parenting 	<ul style="list-style-type: none"> • What helps you cope with everyday life? • How do you take care of yourself and gather strength? • Where do you draw your strength? • How does this help you in parenting?
<ul style="list-style-type: none"> • What the parent identifies as everyday stressors • Problem-solving skills • Stressors precipitated by crises 	<ul style="list-style-type: none"> • What kinds of frustrations or worries do you deal with during the day? • How do you solve these everyday problems as they come up? • Has something happened recently that has made life more difficult?
<ul style="list-style-type: none"> • Impact of stress on parenting 	<ul style="list-style-type: none"> • How are you able to meet your children’s needs when you are dealing with stress? • How are your children reacting to (crisis)?
<ul style="list-style-type: none"> • How the parent communicates with his or her spouse or partner • Whether there is marital stress or conflict 	<ul style="list-style-type: none"> • How do you and your spouse or partner communicate and support each other in times of stress? • What happens when you and your spouse or partner disagree?
<ul style="list-style-type: none"> • Needs that might be identified by a different family member (not all family members may identify the same needs) • Actions that a parent may need to take when additional needs are identified 	<ul style="list-style-type: none"> • Are other family members experiencing stress or concern? • Has anyone in your family expressed concern about drug/alcohol abuse, domestic violence, or mental health issues? • What steps have you taken to address those concerns?
<ul style="list-style-type: none"> • Short-term supports (respite care, help with a new baby, help during an illness) • Long-term strategies (job training, marital counseling, religious or spiritual practices) 	<ul style="list-style-type: none"> • When you are under stress, what is most helpful? • Where in the community can you find help?

<ul style="list-style-type: none"> • The parent's ability to set and work toward personal goals 	<ul style="list-style-type: none"> • What are your dreams (long-term goals) for yourself and your family? • What are your goals for your family or children in the next week (or month)? • What steps might you take toward those goals in the next week (or month)?
--	---

Knowledge of Parenting & Child Development

All parents have questions about raising their children, and they need timely answers and support from someone they trust. One way to describe this is simply to acknowledge, "Parenting is part natural and part learned." Parents may feel more comfortable voicing concerns and exploring solutions when providers, system partners and Advocates:

- Focus on the parents' own hopes and goals for their children
- Help parents identify and build on their strengths in parenting
- Model nurturing behavior by acknowledging frustrations and recognizing the parents' efforts

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> • The parent's view of his/her child's strengths 	<ul style="list-style-type: none"> • What does your child do best? • What do you like about your child?
<ul style="list-style-type: none"> • How the parent views her/her own role 	<ul style="list-style-type: none"> • What do you like about being a parent? • What do you find challenging as a parent?
<ul style="list-style-type: none"> • How the parent observes and interprets the child's behavior 	<ul style="list-style-type: none"> • What kinds of things make your child happy (frustrated, sad, angry)? • What does your child do when he or she is happy (frustrated, sad, angry)? • Why do you think your child (cries, eats slowly, says "no," breaks rules)?
<ul style="list-style-type: none"> • How the parent encourages positive behavior through praise and modeling 	<ul style="list-style-type: none"> • How have you let your child know what you expect? • What happens when she/he does what you ask?
<ul style="list-style-type: none"> • Whether the parent can identify alternative solutions for addressing difficult behaviors • Community, cultural, and ethnic expectations and practices about parenting 	<ul style="list-style-type: none"> • How have you seen other parents handle this? What would your parent have done in this situation? • What teaching (discipline) methods work best for you? • How does your child respond?

<ul style="list-style-type: none"> • How the parent understands the child's development • Any parental concern that the child's behavior appears to be outside the normal range 	<ul style="list-style-type: none"> • How do you think your child compares to other children his/her age? • Are there things that worry you about your child? • Have others expressed concern about your child's behavior?
<ul style="list-style-type: none"> • How the parent encourages healthy development 	<ul style="list-style-type: none"> • How do you encourage your child to explore his/her surroundings, try new things and do things on his/her own?

Social & Emotional Competence of Children

As an Advocate, your role may simply be to explore how the parents perceive their children's social and emotional development and how that is affecting the parent-child relationship.

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> • How the parent provides a safe and stable home and family environment that supports healthy social and emotional development 	<ul style="list-style-type: none"> • How many people provide care for your child? How often do these people change? • What routines do you keep in caring for your children? • All families experience conflict from time to time. What happens when there is conflict in your house? • How do you keep your baby or child safe at home? In your neighborhood or community?
<ul style="list-style-type: none"> • Whether the parent identifies any delays in social and emotional development • Where the parent might seek help for any concerns 	<ul style="list-style-type: none"> • How does your child's ability to manage emotions and get along with others compare to other children his or her age? • Do you have any concerns about your child's social/emotional skills? • Who might be able to answer your questions about your child's social and emotional development?
<ul style="list-style-type: none"> • How the parent responds to emotional needs 	<ul style="list-style-type: none"> • How do you know when your child is happy? Sad? Lonely? Hurt? • How do you comfort your child? • How do you talk to your child about feelings?
<ul style="list-style-type: none"> • How the parent understands the child's social and emotional competence 	<ul style="list-style-type: none"> • How does your child show affection toward you and other family members? • How does your child get along with peers? • How does your child handle feelings such as frustration or anger? How quickly is he or she able to calm down? • What kinds of things help your child calm down when he or she is upset?

Nurturing & Attachment

Even a few minutes of quality time in the car, at the store, or while cooking dinner means so much to a child. Your role as an Advocate for the child with the parent is to model and acknowledge nurturing behaviors as parents make connections with their baby or child. You can also point out instances of positive interaction between parent and child as a verbal or written observation which will reinforce behavior. Some parents have chosen to communicate the importance of nurturing and attachment this simply: “Our family shows how much we love each other.”

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> • How the parent observes and attends to the child • Specific play or stimulation behaviors 	<ul style="list-style-type: none"> • How much time are you able to spend with your baby/child? • When you spend time with your baby/child, what do you like to do with him/her? • How do you engage your baby during everyday activities (diapering, meals, driving in the car)? • What games or activities does your baby/child like?
<ul style="list-style-type: none"> • How the parent responds to the child's behavior 	<ul style="list-style-type: none"> • What does your baby/child do when he/she is sad, angry, tired? • What happens when your baby/child is overstimulated? • What happens when your child acts out, such as having a tantrum or skips school?
<ul style="list-style-type: none"> • How the parent demonstrates affection • How the parent models caring behavior 	<ul style="list-style-type: none"> • How do you show affection in your family? • How do you let your child know that you love him or her?
<ul style="list-style-type: none"> • How the parent recognizes accomplishments 	<ul style="list-style-type: none"> • What are your child's greatest gifts and talents? • How do you encourage these talents? • What do you do when your child does something great?

Social Connections

Identifying and building on the parents' current or potential social connections, skills, abilities, and interests can be a great way to partner with them as they expand their social networks. For parents who have difficulty establishing and maintaining social connections, your discussion may help them identify what is holding them back. Encourage parents to express goals regarding social connections in their own terms, such as, "I have friends and know at least one person who supports my parenting." Advocates can report those goals and progress in their reports.

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> The parent's current social support system, including family, friends, and membership in any formal groups 	<ul style="list-style-type: none"> Do you have family members or friends nearby who help you out once in a while? Do you belong to a church, temple, mosque, women's group, men's group? Do you have a child in the local school or Head Start program?
<ul style="list-style-type: none"> The parent's social skills and capacity to make and keep friends 	<ul style="list-style-type: none"> Who can you call for advice or just to talk? How often do you see them?
<ul style="list-style-type: none"> The parent's desire for new friends and social connections 	<ul style="list-style-type: none"> What kinds of things do you like to do for fun or to relax? Would you be interested in meeting some other moms and dads who also (have a new baby, like to cook, sing in a choir?)
<ul style="list-style-type: none"> The parent's potential strengths and challenges in making social connections (including concerns such as the parent's language, comfort level in groups, access to babysitting and transportation, recent arrival in the community) 	<ul style="list-style-type: none"> What are some benefits of getting out or joining a group? Do you find it easy or challenging to make friends? What kind of support would you need in order to be able to get out for a day or an evening? How does your spouse or partner help out so that you have some time with friends?
<ul style="list-style-type: none"> Needs that might be met with better social connections (for instance, respite care, a sympathetic listener, a role model) 	<ul style="list-style-type: none"> Would it help you to have more friends or acquaintances to call about _____? Would it help you to know other moms and dads who are dealing with _____?
<ul style="list-style-type: none"> The parent's interest in starting or facilitating a community group 	<ul style="list-style-type: none"> What would it take to get a group of parents together to _____?

Concrete Support in Times of Need

Most parents are unlikely to use or identify with the words “concrete supports.” Instead, they might express a goal such as, “My family can access services when we need them.”

Gathering information through conversations with the parents to identify their most critical basic needs and locate concrete supports, keeps the focus on family-driven solutions. As a collaborative partner on the case, your role may simply be to make referrals to the essential services, supports, and resources that parents say they need in your report to the court or during Family Team Meetings.

In order to explore...	Ask the parent...
<ul style="list-style-type: none"> The parent’s view of the most immediate need 	<ul style="list-style-type: none"> What do you need to (stay in your house, keep your job, pay your heating bill)?
<ul style="list-style-type: none"> Steps the parent has taken to deal with the problem 	<ul style="list-style-type: none"> How have you handled this? What kind of response have you gotten? Why is this working or not working?
<ul style="list-style-type: none"> Ways the family handles other problems Current connections that might offer help for the new problem 	<ul style="list-style-type: none"> What has worked well in the past? Are there community groups or local services that have been or might be able to offer assistance? Do you belong to a faith community? Do you have a relationship with a pediatrician? Is your child enrolled at a local school?
<ul style="list-style-type: none"> Other services and supports that would help the family 	<ul style="list-style-type: none"> Have you thought about _____ (local program that provides housing or food)? Did you know that _____ provides (meals on weekends, low-cost child care)?
<ul style="list-style-type: none"> The parent’s desire and capacity to receive new services, including completing applications, keeping appointments, and committing to the solution process 	<ul style="list-style-type: none"> What kind of help do you need to get to these appointments? When would be a good time for me to give you a call to see how it’s going?

Charts adapted from the 2012 Resource Guide **Preventing Child Maltreatment and Promoting Well-Being: A Network for Action** www.childwelfare.gov/preventing

****Activity: Protective Factors in Practice.** The following scenario illustrates how multiple protective factors support and strengthen families who are experiencing stress. As you read the scenario consider if each protective factor is present and what evidence demonstrates it. We will discuss and outline the other kinds of support which might be recommended to help strengthen the family.

Scenario

Sandra is a 28-year-old mother of two who has struggled with substance use issues for close to 10 years. She has two children—Kayla, age 4, and Joshua, who is just 9 months old.



Although Sandra is no longer with Kayla's father, John, he is still active in their lives and has Kayla 3 days a week. Joshua's father moved away and is not actively involved in their lives. Sandra and John have a strong co-parenting relationship, and John often helps Sandra out with care for both children. Although Sandra's substance use has been a source of tension between the two of them, John has been supportive of her while she has pursued treatment in the past.

Sandra considers herself to be an engaged mom. She sings songs, plays age-appropriate games with both Kayla and Joshua, and is tuned in to their needs and limits. However, she recognizes that there have been times when drug use has negatively impacted her parenting. When Kayla was 2, a child neglect report was filed on Sandra. Although no case was opened, Sandra viewed it as a wake-up call and successfully completed a 90-day inpatient treatment program to break her drug habit. Sandra's mother kept Kayla during the week and John kept Kayla on the weekends while Sandra was in treatment. Kayla had problems expressing herself during this time. She had temper tantrums at times; other times she clung to her grandmother and was afraid that she would leave her.

Once Sandra came home, she remained drug free until recently. Sandra was prescribed painkillers as part of her recovery from Joshua's birth and has been gradually increasing her substance use, combining prescription and street

drugs. She recognizes the drug use is getting in the way of her parenting and work but doesn't know exactly how to stop or where to turn for help.

Consider if each protective factor is present and how demonstrated:

Nurturing and attachment _____

Knowledge of parenting and child development

Parental resilience _____

Social connections _____

Concrete support for families _____

Social and emotional competence of children _____

What other kinds of support might help strengthen this family?

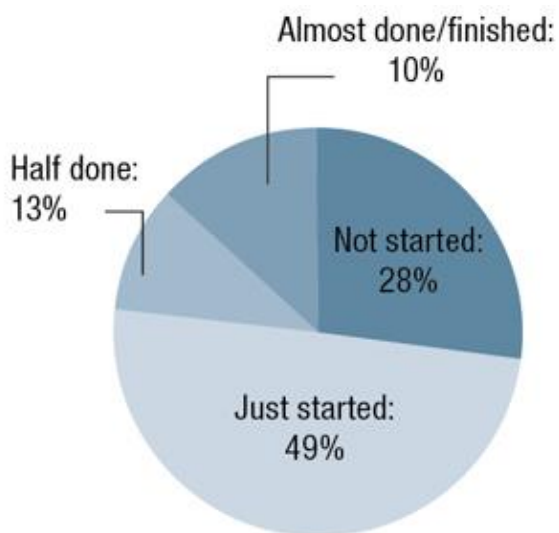
Using a Protective Factors Lens for Monitoring Progress Towards Case Closure and Permanency

While monitoring a case, Advocates need to maintain the focus on supporting the child's need for permanency. While there are many definitions of permanency, Advocates need to consider both relational and legal permanency. Outlining what permanency provides to a child often elicits the following descriptions:

- A safe, stable and nurturing home environment that brings with it a set of relationships with other caring individuals
- Family giving a commitment of continuity for the child which allows for caring, supportive relationships being established intended to last a lifetime
- Opportunity to live in a permanent home with family members that one could be returned to for support, even as an adult

- Home, family bonds, traditions, values, and cultural influences that become part of the individual's sense of self
- A sense of belonging and a definitive legal and social status

Advocates can continue to make recommendations that address the specific reason the state became involved in the family circumstances, while also addressing the protective and promotive factors. It is important to realize that this is a balancing act, as the state is obligated to provide reasonable efforts to meet the minimum level standard of care. This standard does not always rise to the level of supporting the increase in protective and promotive factors.



As a reminder, do not forget to include any smaller steps of progress the child and family are making toward any goal outlined in the CPP domains or in the court order. Examples might include attending therapy, school, visitations, or maintaining employment. Goal completion might need to be an action beyond simply attending, but it is important to remember that people are more likely to work on areas of change and build upon their strengths when their strengths are noticed

and honored. The result of using that lens is more likely to be a successful resolution of concerns and goals attained.

As Advocates balance their efforts to focus on strengths, it remains critical for advocacy efforts to also monitor the risks that remain. These risks must be addressed for safe reunification to occur which ensures that the child's need for safety and well-being will continue. Refer to your Pre-Service handouts for additional information on risks factors.

****Activity: Apply the Protective Factors in Practice.** For more concrete assistance in applying the protective factors as the lens for monitoring progress on your assigned case and for understanding the prognosis for reunification, refer to **Worksheet 2 and 3.**



The final goal of advocacy work is the safe closure of the case and increasing well-being for the child while establishing permanency. DHS must incorporate strategies and steps to achieve this from the onset of case planning. It is understood that perfection is an unlikely standard for achieving family change. A basic condition for case closure then, is that the family, the family team, the court, and service system practitioners need to be assured of adequate child safety and well-being and possess a reasonable expectation that these conditions will be sustained by the family following independence from the service system.

The questions to ask and therefore monitor include:

- Have enough protective provisions been put into place to keep people in the home safe?
 - Is the home environment safe and stable?
 - Are the children's basic needs being met?
 - Are the caretakers able to manage risks or threats to safety to the child and others in the home?
- Have behavioral patterns been acquired and then adequately and consistently demonstrated by the caregiver to preserve or reunify the family and maintain family stability and daily functioning?
- Have recovery/relapse prevention, advance care directives, and safety plans been put into place and known to work reliably?
- Are there sustainable family supports (such as housing, health care, adequate supervision, connections to family and community supports) that will preserve and sustain the family following case closure?
- Is there resolution of legal issues and court requirements (such as court orders in place changing the permanency goal to guardianship or adoption) so that family independence and permanency can occur?



- If the youth is “aging out of the system”, does the youth have the adequate supports to successfully transition to independent living? Is the youth connected with a supportive adult that has a life-long commitment to the youth?
- Have the measures for determining progress, outcomes, and satisfaction of case requirements been defined and met? How will we know what’s working and when we are done?
- If the court ends its involvement, will DHS continue to provide services needed to assure safety, permanency, and well-being?



Advocating for Hopeful Endings

When asked why volunteers and paid staff work for the CASA Program, the answers vary from person to person. But at the core, the passion is the same, which is to make a difference in the life of a child. By doing so, Advocates are also making a difference in a broader scope, in the life of a family, in our communities, and in our greater society.

The role of the Advocate is to take the time to ponder issues and examine the case nuances to effectively advocate, to accomplish certain activities when assigned to a case, and to support the creation of a hopeful ending to the case.

As a program, our role is to recruit, train, supervise and support the Advocates and Coaches so they can be as effective as possible while working towards those hopeful endings.

In addition, the State and National CASA program is obligated to consider what else the system can do to improve the work each one of us does on a regular basis, to increase the number of hopeful endings to as many stories as we can. One way we have found to help the Iowa Child Advocacy Board (ICAB) perform one of our most basic functions, to report on the welfare and well-being of Iowa’s abused and neglected children to

the Iowa Legislature, Department of Human Services, the Judiciary and the general public is by the information gleaned while monitoring a case from the child assessments. This helps teach us what else we need to do, to train and support our Advocates and Coaches. In addition, aggregated information obtained from the assessments will be used by both ICAB and Friends of Iowa CASA as we apply for additional grant funding. It helps us tell our story, which is what we've always known for decades, that Iowa CASA volunteers effectively make a difference in the lives of Iowa children and the program deserves additional funding. Finally, the National CASA Association is creating new standards that measure CASA Program performance and case-level outcomes. This helps demonstrate at a National level that CASA Programs are beyond being a community-based 'feel-good' volunteer program, but that our program makes a real, measurable difference in the lives of the children served by a CASA Advocate. So not only is it in the best interest of the children we serve to pay attention to their overall outcomes, but future CASA program sustainability will depend on our ability to collect data and demonstrate "the good" we do.

With that lens, please remember that every staff member at the Iowa CASA Program desires to make a difference through each of our Advocates. These required first year trainings and subsequent in-service trainings are intended to help you be the best Advocate you can be, making a difference in the life of the child you are assigned.





As a Court Appointed Special Advocate:

Final Considerations



- Be aware of the placement timeline for a child in foster care; know the date that the child was removed from parental custody as that date determines when the “permanency clock” begins.
- Never lose sight of the urgency about a child’s situation. Be mindful of the length of time a child is in foster care and the rate of parental change. Every day that a child remains out of the home, something is lost.
- Assure that permanency planning options are being explored to include concurrent planning. Has a relative search been done? Is the current foster/adopt family willing to be a permanent placement? Ensure parents are informed and aware of the “permanency clock” timeline.
- Always review the current court order for the court's expectations of the family and service providers and the next court date and time.
- Always mark your calendar with the next court date, and the date you will update your CAMS assessment sections and communicate with your Coach/Coordinator if you are NOT able to attend. We will always assume you WILL be in attendance unless otherwise communicated.
- Consider court attendance as not optional!
- Remember your role is to look at the case with fresh insight, report on strengths and what is working, and share concerns about what still needs to occur for permanency to be achieved for the child.
- Stay in communication with your Coach/Coordinator about any case concerns, barriers to your efforts, or questions.

- Update CAMS minimum of monthly. Entering your contact notes consistently will result in less angst and time needed to write your court report.
- Always be aware of the type of hearing that is happening next. Be aware of the purpose of each type of hearing. Keep the type of hearing and purpose of the hearing in mind as you work your case during that time period. Use the appropriate questionnaires as you meet with people involved in your case.
- As you gather additional information, do not rely solely on reports as they are only one source of information. Use professional reports as the means to organize other questions you may have to clarify information and develop a plan for other contacts you need to make in the case.
- Acquiring first-hand information independently and objective observations are the two critical areas of CASA information provided to the judge.
- Refer to the Investigating and *Gathering Information Toolkit* for areas to consider acquiring needed facts for each hearing.
- As you begin to prepare your CASA report for court be aware of the type of hearing and use resources available to make appropriate recommendations in the case.
- Be diligent in your ongoing self-reflection to prevent bias in your assessment and recommendations. Refer to *Reflections to Prevent Bias* section before every report is written.
- Remember your CASA report is the most essential aspect of your advocacy work. It is the tool to effectively communicate valuable information to the judge with your recommendations for the child's best interests in achieving permanency, safety, and positive well-being and resiliency for life-long successful outcomes.

Evaluation: Monitoring a Case

Please complete this evaluation of Monitoring a Case training. Did you learn what was intended? (6 is high and 1 is low)

Learning Outcomes	Ratings					
	6	5	4	3	2	1
1. I can identify the key issues to monitor based on specific court hearings and DHS CPP goals.						
2. I can list key components of protective and promotive factors to monitor resilience-based recommendations.						
3. I can demonstrate an understanding of the CASA's monitoring role.						
4. I can outline case specific monitoring goals for individualized case specific advocacy efforts on my assigned case.						
5. The content of this session was helpful for me to use in my role as Monitor.						
6. The materials were...						
7. The facilitator explained things well.						
8. Overall, I rate this session...						

9. What was the most valuable to you?

10. Is there anything we could improve or do differently?

11. Identify additional topics you would like to learn more about.

Date of in-service: _____

Facilitator: _____

Thank you for your participation and feedback!